



Finance Department • 102 N Neil St • Champaign IL 61820 • (217) 403-8940 • fax (217) 403-8995 • www.ci.champaign.il.us

## LOCAL MOTOR FUEL TAX RETAIL REMITTANCE RETURN

*The monthly local motor fuel tax return and amount remitted is due no later than the 20<sup>th</sup> of each calendar month for the amount of the previous month's collection.*

Business Name & Local Address

Filing Month/Year \_\_\_\_\_

Illinois Business Tax (IBT)# \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Corporate Name & Mailing address (if different)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ST-1 "Sales and Use Tax and E911 Surcharge Return" form or ST-2, if applicable.**

☐ *check box if attached*

**If reporting multiple locations on one return, attach MULTIPLE LOCATION REPORTING form**

1. Total gallons of gasoline purchased .....1 \_\_\_\_\_

2. Total gallons of diesel purchased .....2 \_\_\_\_\_

3. Total gallons sold (add lines 1 and 2) .....3 \_\_\_\_\_

4. Tax rate of \$.04 per gallon ..... x \$.04

5. Subtotal (multiply line 3 times line 4) ..... 5 \_\_\_\_\_

6. COLLECTION FEE – Deduct 1% (Line 5 times .01) ..... 6 \_\_\_\_\_

If filed by the 20<sup>th</sup> of the month for the previous month

7. Late Penalty – 2% per month (if applicable) (Line 5 times .02) .....7 \_\_\_\_\_

(If filed after the 20<sup>th</sup> of the month for the previous month)

**TOTAL AMOUNT REMITTED** (lines 5 through 7) ..... \_\_\_\_\_

(Note: Additional penalties and court costs may be imposed for failure to file the return and pay the tax by the due date.)

UNDER PENALTIES OF PERJURY AS PROVIDED BY LAW, I ATTEST TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION ON THIS FORM IS TRUE, CORRECT AND COMPLETE. THE INFORMATION PROVIDED HERE IS PROPRIETARY COMMERCIAL & FINANCIAL INFORMATION AND DISCLOSURE WOULD CAUSE COMPETITIVE HARM.

\_\_\_\_\_  
Signature of Taxpayer

\_\_\_\_\_  
Signature of Preparer

\_\_\_\_\_  
Title

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date Prepared

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email address

Make check payable to: **City of CHAMPAIGN** 102 N. Neil St., Champaign, IL 61820

Questions? Contact City of Champaign Finance Department (217) 403-8940